

**WRASAP**Western Regional Agricultural
Stress Assistance Program

Western Regional Agricultural Stress Assistance Project (WRASAP) Agriculture Workers Survey

Welcome to the Western Regional Agricultural Stress Assistance Project (WRASAP) Agriculture Workers Survey!

You are being asked to participate in a research study to learn about the various stressors that agricultural workers in the Western states face, as well as what type of information you would most like to receive to help manage stress. Information gathered from this research will help researchers from across 13 western states and 4 US territories develop education and outreach materials to help agricultural workers better manage their stress and obtain additional resources if/when needed.

We are asking you to participate in this research since you are an agricultural worker in one of the 13 western states or 4 U.S. territories that are working in collaboration as a part of this USDA-funded research project. Although this project spans the Western Region of the US, this survey itself is being carried out by a smaller team of researchers from Montana State University, Colorado State University, and the University of Nevada, Reno.

PARTICIPATION IS COMPLETELY VOLUNTARY.

If you agree to participate you will be asked to complete a survey that should take approximately 15 minutes of your time. You can choose to not answer any questions you do not want to answer and/or you can stop the survey at any time.

This study is considered to be minimal risk of harm. This means the risks of your participation in the research are similar in type or intensity to what you encounter during your daily activities. You may experience minor discomfort due to thinking about stress. Although all of the benefits of this research are not certain, we hope to learn more about the mental health of agriculture workers as well as the stressors that they face. The direct benefit to you is that we will use the information we collect in this survey to develop free educational and outreach programs to help agricultural workers across the Western Region of the US minimize their stress. We also plan to use these developed programs to contribute to scientific knowledge.

We will treat your identity and the information collected about you with professional standards of confidentiality and protect it to the extent allowed by law. Your responses to this survey cannot be traced back to you, and you will not be personally identified in any reports or publications that may result from this study. If you have any questions, concerns or complaints about the survey or the research, you may reach out to Dr. Michelle Grocke at michelle.grocke@montana.edu, Dr. Lorann Stallones at lorann.stallones@colostate.edu, or Dr. Brenda Freeman at brendafreeman@unr.edu. If you have additional questions about the rights of human subjects, please contact the Chair of the Institutional Review Board at Montana State University, Mark Quinn, (406) 994-4707 (mquinn@montana.edu).

Upon completing the survey, you will be asked if you would like to be entered to win a \$50 gift card (ten \$50 cards are available per U.S. state/territory).

Upon completing the survey, you will also be invited to participate in Phase 2 of this project, which involves a 30-45 minute phone interview with someone on our research team. If you are interested, and are randomly selected, you will receive a \$75 gift card upon successful completion of the interview.

Thank you for your participation in this study!

The U.S. Department of Agriculture (USDA), Montana State University and Montana State University Extension prohibit discrimination in all of their programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital and family status.

If you understand the statements above, and freely consent to participate in this study, please answer 'yes' to begin the survey:

☐ Yes

☐ No

Please skip to the end of the survey if you answered "No" above.

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate how often you felt or thought a certain way. Fill in the circle that best fits your response to each question.

	Never	Almost Never	Sometimes	Fairly Often	Very Often
In the last month, how often have you been upset because of something that happened unexpectedly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt that you were unable to control the important things in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt nervous and “stressed”?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt confident about your ability to handle your personal problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt that things were going your way?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you found that you could not cope with all the things that you had to do?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you been able to control irritations in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Within the last month, how often have you felt that you were on top of things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you been angered because of things that were outside of your control?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

During which season do you experience the most stress (please list the seasons in order, starting (1) with the one in which you experience most stress to the one with the least stress (4))?

_____ Fall (Sept - Nov)

_____ Winter (Dec - Feb)

_____ Spring (March - May)

_____ Summer (June - August)

Within the last year, please indicate how often the following led you to experience stress:

	Never	Almost Never	Fairly Often	Very Often	Not Applicable
Lack of access to reliable/affordable transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cognitive/emotional disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community Violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COVID-19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crop/plant disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discrimination/racist treatment in community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty getting to the United States to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug and alcohol use in the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exposure to pesticides and other chemicals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family separation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial worries (loans, debts, bank pressure, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grief (death of a loved one or community member)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Illness/injury preventing ability to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insecure job status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long working hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of access to health insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of access to medical care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of employer provided personal protective equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of entertainment in community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of drinking water, hand washing facilities, toilets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of time (no time to rest, complete tasks well, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Language barrier	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(continued) Within the last year, please indicate how often the following led you to experience stress:

	Never	Almost Never	Fairly Often	Very Often	Not Applicable
Issues with livestock (disease, injury, reproductive issues)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low wages	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mobile Lifestyle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pesticide safety regulation violations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical isolation (lack of nearby services, health care, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor communication between other workers and managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social isolation (feeling lonely, lack of community support)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substandard housing (crowded, unclean)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technology Issues (machinery breakdown, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in intense wildfire smoke conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of work/family balance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in either cold or hot weather	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other stressor, not listed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

To help you manage and/or cope with your stress, how interested would you be to learn about the following topics if the content was made available to you? Fill in the circle that best fits your response:

	No Interest	Neutral	Interested	Very Interested
Alcohol and/or Drug Misuse Cessation/Rehabilitation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Career/Vocational Support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grief Counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help learning to speak English	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help with getting a driver's license	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Help with getting your kids to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mindfulness (breathing exercises, relaxation techniques, meditation, yoga)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nutrition and Cooking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gardening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical Activity (strength training, cardio)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical Rehabilitation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationship Support (with coworkers/friends/family)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retirement Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support Groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stress Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training on animal handling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training on pesticide safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training on tractor and equipment driving and safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco/Marijuana/Vaping Cessation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Topic Not Listed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In thinking about the topics from the previous question that you are interested in learning about, how would you be interested in receiving this information? Select all that apply.

- ☐ Ag-specific telephone help line (e.g. Farm Aid)
- ☐ General telephone help line
- ☐ Face-to-face counseling
- ☐ Individual consultation
- ☐ In-person class in your community
- ☐ Online or webinar class with an instructor
- ☐ Online, self-guided class on your own time (no instructor present)
- ☐ Online library of resources
- ☐ Podcast
- ☐ Printed resources (e.g. newsletters, articles, factsheets) mailed to you
- ☐ Printed resources (e.g. newsletters, articles, factsheets) available at your local Extension office
- ☐ Printed resources (e.g. newsletters, articles, factsheets) available at grocery stores, gas stations, other local stores
- ☐ Radio
- ☐ Religious/Church/Spiritual Leaders
- ☐ Social Media (e.g. Facebook)
- ☐ TV
- ☐ Telehealth counseling
- ☐ Other method of receiving information not listed _____

If the way you would like to learn about a specific topic varies by topic, please tell us more:

If all were available to you in your community, how likely would you be to make use of the following resources and learning opportunities?

	Very Unlikely	Unlikely	Likely	Very Likely
Discussing stress, health, and wellness topics with someone you know well, at informal events (during a potluck, at a backyard barbecue, coffee shop, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussing stress, health, and wellness topics with a representative working on behalf of your community or health organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learning about stress management and mental health through a brief, self-paced online course.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talking to a peer listener about stress and mental health (a peer listener is a member of the agricultural community who is trained to listen and respond to their neighbors and direct them to available resources).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
You or someone from your household/family participating in community planning sessions to identify and address health and wellness issues in your community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in virtual (e.g. Zoom, Skype) informal discussion groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in online or telephone counseling/therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in a support group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

State/territory/county you live in:

- ☐ Alaska
- ☐ American Samoa
- ☐ Arizona
- ☐ California
- ☐ Colorado
- ☐ Guam
- ☐ Hawaii
- ☐ Idaho
- ☐ Micronesia
- ☐ Montana
- ☐ Nevada
- ☐ New Mexico
- ☐ Northern Mariana Islands
- ☐ Oregon
- ☐ Utah
- ☐ Washington
- ☐ Wyoming

County you live in: _____

Zip code: _____

Age: _____

How many years have you worked in the agricultural industry (please enter the number of years)?

Gender:

- ☐ Male
- ☐ Female
- ☐ Non-Binary

Marital status

- ☐ Single
- ☐ Cohabiting
- ☐ Married
- ☐ Divorced
- ☐ Widow/Widower

Marital status

- ☐ White or European American
- ☐ Hispanic or Latino(a)
- ☐ Black or African American
- ☐ Asian or Asian American
- ☐ American Indian or Alaskan Native
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Pacific Islander
- ☐ Multi-ethnic
- ☐ Other (please specify): _____
- ☐ Prefer not to answer

What is your native language? _____

Highest level of education completed:

- ☐ 2nd/3rd grade
- ☐ 8th grade
- ☐ High School Diploma or GED
- ☐ Trade School or Associates Degree
- ☐ Some College
- ☐ Bachelors Degree
- ☐ Masters Degree
- ☐ Doctoral Degree/Terminal Degree

How many months of the year do you work on farm/ranch?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12

In addition to working on the farm or ranch, how many additional jobs do you currently hold?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5+

The following best describes my work on a farm or ranch:

- ☐ Part-time
- ☐ Full-time

Please indicate whether you are a year-round, seasonal, or migrant farmworker.

A seasonal farmworker is a person whose principle employment is in agriculture on a seasonal basis and does not move/travel with the crops.

A migrant farmworker establishes a temporary home during the period of employment and travels with the season of the crops to do farm work.

- ☐ Year-round
- ☐ Seasonal
- ☐ Migrant

Please indicate what type of farm/ranch work you do:

End of Survey. Thank you for your participation.

Please return this survey to:

Dr. Michelle Grocke
PO Box 173370
Montana State University
Bozeman, MT 59717-3370



WRASAP

Western Regional Agricultural
Stress Assistance Program

Western Regional Agricultural Stress Assistance Project (WRASAP)
find resources and learn more at www.farmstress.us

**WRASAP**Western Regional Agricultural
Stress Assistance Program**Western Regional Agricultural Stress Assistance
Project (WRASAP) Agriculture Workers Survey**

Optional Drawing for \$50 visa gift card:

For the time you just spent on this survey, we are giving away 170 \$50 online gift cards (ten per U.S. State/Territory in the Western Region). If you would like to be entered into the drawing for one of those \$50 gift cards, please fill out the information below and check the oval by the agreement statement. Please note that this information is never shared with anyone. It will only be used for drawing purposes and will not be connected to any of your previous responses.

Please print

First and Last Name: _____

State or Territory you reside in: _____

Preferred email address: _____

Phone Number with area code: () _____

Mailing Address: _____

City: _____ State or Territory: _____ Zipcode: _____

- ☐ Yes, please enter me in the drawing to receive a \$50 gift card.

Optional phone interview:

We are looking for 6 volunteers from each U.S. State/Territory to participate in an approximately 30-45 minute phone interview with a member of our research team. The goal of this more in-depth interview is to better understand how you, as an agricultural worker in the Western Region of the U.S., have successfully coped with stressors and/or overcome challenges. If you are interested in participating in a follow-up phone conversation, please fill out all the contact information above, check the oval by the agreement statement below and provide the best time of day to contact you below. All participants who complete the 30-45 minute phone interview receive a \$75 visa gift card. Doing the interview does not alter your option to win one of the raffle prizes listed above.

- ☐ Yes, I would like to complete an in-person phone interview, please call me at the phone number listed above.

Preferred time of day for a phone call (check all the apply):

- ☐ Morning
- ☐ Afternoon
- ☐ Evening

Please return this form separate from the survey to:

Dr. Michelle Grocke
PO Box 173370
Montana State University
Bozeman, MT 59717-3370
